Attorney cket No. 54435.8009.US01 I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail in an envelop addressed to: Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450, on: Date: <u>June 20, 2003</u> PATENT IN THE UNITED STATES PATENT AND TRADEMARK OFFICE IN RE APPLICATION OF: JENSEN, MICHAEL C. **EXAMINER:** PAK, YONG **APPLICATION NO.:** 09/846,637 **ART UNIT:** 1652 FILED: APRIL 30, 2001 FOR: SELECTION SYSTEMS FOR **GENETICALLY MODIFIED CELLS** Transmittal of Amendment Under 37 C.F.R. § 1.111 RECEIVED JUN 2 5 2003 Commissioner for Patents P.O. Box 1450 TECH CENTER 1600/2900 Alexandria, VA 22313-1450 Sir: This communication responds to the Office Action dated February 25, 2003. 1. Transmitted herewith are the following:  $\boxtimes$ Amendment Under 37 C.F.R. § 1.111 Petition for One-Month Extension of Time  $\boxtimes$ Terminal Disclaimer Sequence Listing printout, floppy diskette, matching declaration Information Disclosure Statement, Form PTO-1449 (modified), References Replacement Sheets of Drawings Utility Declaration and Power of Attorney.  $\boxtimes$ Check in the amount of \$55. 06/23/2003 GUORDOF1 00000056 09846637

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## 2. Petition for Extension of Time:

Applicant petitions for a one-month Extension of Time, for timely of this transmittal and enclosures.

## 3. <u>Fee Calculation and Payment</u>

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EXTENSION	DN OF TIME	FEE_					\$55	\$55.00_	\$55.00	\$55.00
TOTAL ADDITIONAL FEE						\$55	\$55.00	<b>\$55.00</b> TOTA	<b>\$55.00</b> TOTAL	

<sup>\*</sup> If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

## RECEIVED

4. A check in the amount of \$55.00 is enclosed.

Provisional Fee Authorization: Please charge any underpayment in fees for 3003 timely filing of this transmittal and enclosures to Deposit Account No. 50-2586.

TECH CENTER 1600/2900

Respectfully submitted,

Perkins Coie LLP

Date: June 20, 2003

James J. Zhu

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<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.